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December 18, 2002

JOHN K. CURRIE, OF COUNSEL

FMOSA-2003-14788-1

Chief Safety Officer
Docket Clerk
Federal Motor Carrier Safety Administration
407th Street SW
Washington, D.C. 20590

Attention: Steven Farbman

Re: **Central Auto & Transport L.L.C.**
U.S. DOT #0357848

Dear Mr. Farbman:

The respondent, Central Auto & Transport L.L.C., hereby seeks Administrative Review of the proposed safety rating and responds to the report, dated September 19, 2002 (Exhibit A), of the compliance review conducted on September 17 and 18, 2002 [hereinafter the "report"]. For the reasons set forth below and in the attached Exhibits B and C, the respondent hereby requests a change to the proposed safety rating for corrective action, from "conditional" to "satisfactory."

Factor 6—Ratio of Recordable Accidents to Miles Driven

The report indicates that the respondent received an "unsatisfactory" rating for Factor 6, which measures the ratio of recordable accidents to miles driven in a twelve-month period. The rating of "unsatisfactory" was based upon the auditor's incorrect belief that the respondent had experienced two recordable accidents during the subject time period. Because the respondent had only one recordable accident, however, the ratio falls within the acceptable level, and the rating for Factor 6 should be "satisfactory."

Recordable accident, as defined in 49 CFR 390.5, means an accident involving a commercial motor vehicle operating on a public road in interstate or intrastate commerce which results in a fatality; bodily injury to a person who, as a result of the injury, immediately receives medical treatment away from the scene of the

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accident; one or more motor vehicles *incurring disabling damage as a result of the accident requiring the motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.*

49 C.F.R. Pt. 385, App. B; § II.B(a); 49 C.F.R. Pt. 385, App. A, § III.B(a) [emphasis added].

The first accident, involving driver Nesbitt, does not qualify as a recordable accident pursuant to this definition. The accident in question occurred on Saturday, March 9, 2002, at 7:44 a.m. in Johnstown, Rhode Island. According to the police report, prior to driver Nesbitt's arrival on the scene, two vehicles were stopped, one behind the other, at an intersection on a two-lane road. The witness who operated the second car reported that he had been stopped at the signal behind the first vehicle. When the signal turned green, he waited for the first vehicle to move; when it did not move, he blew his horn. Rather than proceed through the intersection, the driver of the first vehicle exited his vehicle and approached the second vehicle, yelling at him for blowing his horn. As driver Nesbitt approached the intersection, he could see the taillights of the vehicles in the fog, as well as the green signal. When the vehicles did not move, driver Nesbitt applied his brakes to avoid a collision. In so doing, he caused his truck to jackknife; however, there was no contact between the truck and any other vehicle. A witness traveling in the other lane confirmed that driver Nesbitt acted as he did in order to avoid hitting the stopped vehicles in his travel lane. Both witnesses opined that the accident was caused by the driver of the first vehicle, who fled the scene.

Driver Nesbitt's truck did not sustain any damage as a result of the accident. Because the truck jackknifed and was leaning, and because the fuel tanks were gravity-fed such that the fuel in one tank was spilling into the other, a small amount of fuel spilled at the scene. To guard against environmental hazards or risks, the fuel was pumped from the truck at the scene by Simm Environmental. Concetta's Towing straightened the jackknife. Once the jackknife had been straightened, Concetta's towed the truck from the scene to secure payment for its services in light of the fact that the accident had involved an out-of-state truck which was headed for Florida early on a Saturday morning and the fuel had been pumped from the truck. There was no damage to either the fuel tanks or to the nose; but for the fact that the fuel had been pumped from the truck, the truck was capable of being driven.

Because this accident did not involve a motor vehicle which required towing due to disabling damage incurred in the accident, the March 9, 2002, accident was not a recordable accident. Therefore, it should not have been included in the calculations of Factor 6.

It is also notable that, as evidenced by the police report, the accident in question was unavoidable. In fact, it is apparent that, but for the driver's quick thinking and evasive actions, the accident could easily have resulted in serious physical injury or loss of life, not only to the

driver, but to the drivers of the vehicles who were improperly stopped at a green light. The police officer opined that the accident was caused by the operator of the Cadillac, who chose to exit his vehicle, thereby blocking the travel portion of the highway, to confront the driver of the car directly behind him, despite the dense fog, wet roads and "extremely poor driving conditions."

By contrast, on May 6, 2002, driver Sulzinski was involved in an accident on I-84 when he came upon an accident scene and collided with a vehicle which had stopped for such accident. There was no fatality or bodily injury as a result of this accident; however, the vehicle struck by driver Sulzinski's truck required towing due to disabling damage. Therefore, the respondent acknowledges this accident qualified as a recordable accident. Although driver Sulzinski was cited for traveling too closely, the charges against him were nulled.

The calculations in Factor 6 should, therefore, be corrected as follows:

$$(1 \times 1,000,000) / 1,016,639 = 0.9836333$$

Because a crash rate ratio of 0.000 to 1.500 merits a rating of "satisfactory," the respondent asks that its rating for Factor 6 be changed from "unsatisfactory" to "satisfactory," and that its overall proposed rating be corrected as a result thereof, from "conditional" to "satisfactory."

Other Areas of Concern

The respondent hereby addresses the other areas of concern identified in the report.

#1 State—Primary: 14-163c-1-1;¹ Secondary: 382.105; CFR Equivalent: 40.25(d)

This area of concern alleged a failure to obtain certain information. The respondent respectfully states that this appears to have been an oversight by the auditor, as the driver data sheet was contained in driver Dorozko's file as required.

#2 Federal—Primary: 382.303(a)

While the driver was sent for a post-accident test, the respondent assumed, incorrectly, that the collection site would perform all tests required by law. In the future, the respondent will

¹The respondent is not able to identify the regulation or code section to which this number refers. While it is similar to the citation form for the Regulations of the State of Connecticut, no Connecticut regulation exists with this number.

specify the tests to be performed. In addition, the respondent has included educational material in memoranda in order to guarantee that the drivers are also aware of such requirements.

#3 Federal—Primary: 382.303(d)(1)

As set forth above, the respondent was unaware at the time that the collection site would not perform the alcohol test. In the future, the respondent will specify the tests to be performed. In addition, the respondent has included educational material in memoranda in order to guarantee that the drivers are also aware of such requirements.

#4 Federal—Primary: 382.305(i)(2)

The respondent has been participating in a stand-alone random drug testing program. In addition, the respondent has implemented a policy whereby it has also tested non-CDL drivers, as well as CDL drivers, although it was not required to test non-CDL drivers. The purpose of this policy was to ensure that as many drivers as possible would be randomly tested, with the goal of minimizing the chance of an incident involving one of the respondent's drivers. As a result of the report, the respondent has requested that its drivers be put into a third-party pool to guarantee an equal chance of selection for testing. In addition, the respondent has placed CDL drivers into a separate pool from non-CDL drivers to ensure both groups of drivers a greater chance of being tested.

#5 State—Primary: 14-163c-1-11²; CFR Equivalent: 395.8(a)

The respondent has reviewed this issue with the accounting department. It appears that, out of 34 people, three time cards were not totaled, although the times were recorded on such cards. The respondent's accounting department has stated that it will review such cards to ensure that all future time cards will reflect both times and total hours.

The respondent also notes that, in the auditor's review of this issue, there appeared to be some confusion with respect to the driver's point of origin. The auditor appeared to be under the impression that the driver had been driving from New Salem, New York; however, as evidenced by the freight manifests and maps shown to the auditor, the driver was in North Salem, NY, which is approximately thirty (30) minutes from Danbury, CT. To the extent that this misunderstanding has been factored into this matter, the respondent asks that the report be corrected to reflect the driver's true location.

²See footnote 1.

#6 Federal—Primary: 395.8(e)

The respondent has investigated this matter and has determined that the driver did not log off during the time between the accident and the resumption of travel. The respondent has included this issue in a memorandum which it has prepared in order to ensure that drivers are properly educated as to the DOT's requirements. In addition, the respondent will monitor drivers' activities more closely to ensure that every action is recorded accurately.

#7 Federal—Primary: 395.8(e)

The respondent has investigated this matter and has determined that the driver did not log off for the fifteen minutes required for refueling. The sole purpose of this stop was refueling; the driver did not take a break or mealtime without logging off. The respondent has included this issue in a memorandum which it has prepared in order to ensure that drivers are properly educated as to the DOT's requirements. In addition, the respondent will monitor drivers' activities more closely to ensure that every action is recorded accurately.

#8 Federal—Primary: 395.8(f)

The respondent has investigated this matter and has determined that commodity and shipping numbers were not available, as the trailer was empty and the driver was on his way to load the truck. Accordingly, to the extent that this misunderstanding has been factored into this matter, the respondent asks that the report be corrected to reflect the fact that the trailer was empty and, therefore, no such numbers were available.

#9 Federal—Primary: 396.3(b)(1)

The respondent maintains two sets of files with respect to maintenance records; one set is maintained on computer, and the other set contains hard copies of documents. Because the computer files do not print out enough details for purposes of an audit, the respondent has created physical files which are more thorough. The respondent will monitor these physical files closely to ensure that they are in compliance with the requirements of the DOT.

#10 State—Primary: 14-163c-1-12;³ CFR Equivalent: 396.3(b)(1)

The respondent maintains two sets of files with respect to maintenance records; one set is maintained on computer, and the other set contains hard copies of documents. Because the computer files do not print out enough details for purposes of an audit, such as tire sizes, the

³See footnote 1.

Chief Safety Officer
Docket Clerk
Federal Motor Carrier Safety Administration
Central Auto & Transport L.L.C., US DOT #0357848
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respondent has created physical files which are more thorough and include such information. The respondent will monitor these physical files closely to ensure that they are in compliance with the requirements of the DOT.

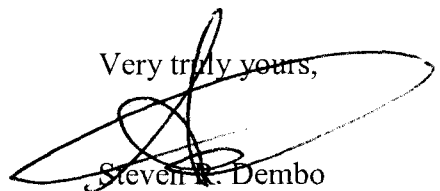
Conclusion

The March 9, 2002, accident is not a recordable accident within the meaning of 49 C.F.R. 390.5. Therefore, the ratio of recordable accidents to miles driven in a twelve-month period clearly warrants a rating of "satisfactory" for Factor 6. As detailed above, the report contains other inaccuracies which also appear to have impacted the respondent's rating. In addition, the respondent has taken steps to ensure that it fully addresses the areas of concern identified in the report.

For these reasons, the respondent, Central Auto & Transport L.L.C., asks that its proposed rating be changed from "conditional" to "satisfactory."

Please do not hesitate to contact the undersigned if you have any questions. Thank you for your attention to this matter.

Very truly yours,



Steven R. Dembo
Counsel for the Respondent

SRD/lhb


Enc.

cc: Mr. Robert Greco
Central Auto & Transport

UNITED STATES DEPARTMENT OF TRANSPORTATION

FAX TO STATE

DUNBO

	US DOT #: 0357848	LEGAL: CENTRAL AUTO & TRANSPORT LLC							
	OPERATING (DBA):								
REVIEW TYPE: CR STATUS: Update PLACE: Principal Office CENSUS TYPE: Carrier BUSINESS: Corporation	PHYSICAL ADDRESS: 195 MAXIM RD COUNTY: 003 HARTFORD, CT, 06114								
	MAILING ADDRESS: PO BOX 340649 COUNTY: 003 HARTFORD, CT, 06134								
	PHONE: (860)246-7616				TOLL FREE:		FAX #: (860)246-3446		
	E-MAIL:								
MC/MX #: 230816		FEDERAL TAX ID #: 06-1470781 (EIN)							
OPERATION TYPE		INTERSTATE		INTRASTATE		OIC: 09		TERRITORY:	
CARRIER OPERATION:		Non-HM		Non-HM					
SHIPPER OPERATION:		N/A		N/A					
CARRIER CLASSIFICATION:		(A)							
Authorized									
CARGO CLASSIFICATION:		(A, D, E)							
General Freight; Motor Vehicles; Driveaway/Towaway									
EQUIPMENT:	TRUCK	TRUCK TRACTOR	TRAILER	HM TANK TRUCK	HM TANK TRAILER	MOTOR COACH	SCHOOL BUS	LIMO	PASS. VAN
OWNED	16	7	19						
TERM LEASED									
TRIP LEASED									
DRIVERS:	INTER	INTRA	Avg. Trip Leased Drivers/Mo.:				Does carrier transport placardable quantities of HM?		
<100 Miles:			Total Drivers:				15	No	
>= 100 Miles:	15		CDL Drivers:				12		

Questions about this report or the Federal Motor Carrier Safety or Hazardous Materials regulations may be addressed to the Federal Motor Carrier Safety Administration at:

Glastonbury Corporate Center, 628-2 Hebron Ave, Suite 303
Glastonbury, CT 06033-5007
Phone: (860)859-6700 Fax: (860)859-6725

This report will be used to assess your safety compliance.

PERSON(S) INTERVIEWED: Robert Greco
TITLE(S): President

REPORTED BY:  TITLE:  CODE: US0784 DATE: 09/19/2002
RECEIVED BY: TITLE:

MCS-151/CR CAPRI Version 4.4.2

PART A

Printed 09/19/2002 8:13 AM



COMPLIANCE CENTRAL AUTO & TRANSPORT LLC

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PART B

1 STATE	PRIMARY: 14-163c-1-1 SECONDARY: 382.105 CFR Equivalent: 40.25(d)	NUMBER FOUND	NUMBER CHECKED	DRIVERS/VEHICLES	
		2	3	IN VIOL	CHKD
				2	3

DESCRIPTION:

Using a driver to perform safety sensitive functions after failing to obtain the information required by 40.25(b), from previous employers within 30 days without obtaining or making and documenting a good faith effort to obtain the information.

EXAMPLE:

Driver Dorozko,
Trip date; 6/13/02.

2 FEDERAL	PRIMARY: 382.303(a)	NUMBER FOUND	NUMBER CHECKED	DRIVERS/VEHICLES	
		1	2	IN VIOL	CHKD
				1	2

DESCRIPTION:

Failing to conduct post accident alcohol testing for each surviving driver.

EXAMPLE:

Driver Sulzinski,
Accident date; 5/6/02

Driver was cited on scene for accident and this was a recordable accident. Carrier did send driver for Post Controlled Substance Test.

3 FEDERAL	PRIMARY: 382.303(d)(1)	NUMBER FOUND	NUMBER CHECKED	DRIVERS/VEHICLES	
		1	2	IN VIOL	CHKD
				1	2

DESCRIPTION:

Failing to prepare and maintain on file a record stating the reasons the alcohol post-accident test was not properly administered.

EXAMPLE:

Driver Sulzinski,
Accident date, 5/6/02.

Motor carrier did not document why alcohol post-accident test was not properly administered.

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PART B

4 FEDERAL	PRIMARY: 382.305(i)(2)	NUMBER FOUND 2	NUMBER CHECKED 12	DRIVERS/VEHICLES IN VIOL 2	CHKD 12
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DESCRIPTION:

Failing to ensure that each driver selected for random alcohol and controlled substances testing has an equal chance of being selected each time selections are made.

EXAMPLE:

Driver Sulzinski,
Trip date 5/6/02.

5 STATE	PRIMARY: 14-163c-1-11 CFR Equivalent: 395.8(a)	NUMBER FOUND 31	NUMBER CHECKED 93	DRIVERS/VEHICLES IN VIOL 2	CHKD 4
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DESCRIPTION:

Failing to require driver to make a record of duty status.

EXAMPLE:

Driver Tracey,
Trip date; 7/3/02 (CT-CT)

Driver does use a time card but the hours are not totalled at the end of the day.

6 FEDERAL	PRIMARY: 395.8(e)	NUMBER FOUND 3	NUMBER CHECKED 44	DRIVERS/VEHICLES IN VIOL 1	CHKD 2
--------------	-------------------	----------------------	-------------------------	----------------------------------	-----------

DESCRIPTION:

False reports of records of duty status.

EXAMPLE:

Driver Sulzinski,
Trip date 5/6/02

Driver was involved in an accident at 1626 hours (4:26 p.m.) and LOG reads driving from 1600-1900 hours.

7 FEDERAL	PRIMARY: 395.8(e)	NUMBER FOUND 3	NUMBER CHECKED 44	DRIVERS/VEHICLES IN VIOL 1	CHKD 2
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DESCRIPTION:

False reports of records of duty status. (INACCURATE)

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EXAMPLE:

Driver Nesbitt,
Trip date 3/22/02.

Driver was getting fuel at 1652 hours and LOG reads driving from 1600-1800 hours.

8 FEDERAL	PRIMARY: 395.8(f)	NUMBER FOUND	NUMBER CHECKED	DRIVERS/VEHICLES	
		10	44	IN VIOL	CHKD
				2	2

DESCRIPTION:

Failing to require driver to prepare record of duty status in form and manner prescribed.

EXAMPLE:

Driver Nesbitt,
Trip date 3/22/02.

Driver did not show commodity/ or shipping number.

9 FEDERAL	PRIMARY: 396.3(b)(1)	NUMBER FOUND	NUMBER CHECKED	DRIVERS/VEHICLES	
		2	2	IN VIOL	CHKD
				2	2

DESCRIPTION:

Failing to keep a maintenance record which identifies the vehicle, including make, serial number, year, and tire size.

EXAMPLE:

Truck # 89 & 94 do not show their tire sizes on the folder.

10 STATE	PRIMARY: 14-163-1-12	NUMBER FOUND	NUMBER CHECKED	DRIVERS/VEHICLES	
	CFR Equivalent: 396.3(b)(1)	3	3	IN VIOL	CHKD
				3	3

DESCRIPTION:

Failing to keep a maintenance record which identifies the vehicle, including make, serial number, year, and tire size.

EXAMPLE:

All three vehicles were missing tire sizes.

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COMPLIANCE CENTRAL AUTO & TRANSPORT LLC

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SAFETY FITNESS RATING INFORMATION:

Total Miles Operated: 1,016,639
Recordable Crashes 2
Recordable Crashes / Million Miles: 1.967

OOS Vehicles (CR) : 0
of Vehicles Inspected (CR) : 0
OOS Vehicles (MCMIS) : 2
of Vehicles Inspected (MCMIS) : 5

Your proposed safety rating is

CONDITIONAL

RATING FACTORS

OF POINTS

ACUTE CRITICAL

Factor 1: S 0 0
Factor 2: S 0 0
Factor 3: S 0 0
Factor 4: C 0 0
Factor 5: N 0 0
Factor 6: U - -

The Federal Motor Carrier Safety Administration headquarters office in Washington, D.C. will notify you of your rating in a forthcoming official notice. If your rating is "satisfactory" or is an improvement upon a previous "unsatisfactory" rating, it is a "final rating" and becomes effective on the date of the official notice. If your rating is the same as your previous rating (except satisfactory ratings), or is a downgrade upon a previous rating, it is a "proposed rating" and will become a final rating 61-days after the date indicated on the official notice.

Owners or operators of commercial motor vehicles (except for those that are designed or used to transport hazardous material for which placarding is required and/or are designed or used to transport passengers), who have been declared "unfit" may not operate in interstate commerce beginning on the 61st day after the date of such fitness determination and may not reestablish interstate operations until they become fit for such transportation. An owner or operator is unfit when the Federal Motor Carrier Safety Administration (FMCSA) issues a final "unsatisfactory" safety rating (49 USC 31144(c) and 49 CFR 385.13(a)). All Federal departments, agencies, or instrumentalities are prohibited from using any owner or operator who is unfit by virtue of having a final unsatisfactory safety rating (49 USC 31144(e) and 49 CFR 385.13(b)). Owners and operators are "fit" when the FMCSA issues a final "conditional" or "satisfactory" safety rating.

Corrective action must be taken for the violations (deficiencies) listed on Part B of this review.

APPEAL RIGHTS: [A] 49 CFR 385.17: A request for a change to a safety rating for corrective action may be made at any time. This request must be made in writing to the FMCSA Service Center for the geographic area where the carrier maintains its principal place of business (See 49 CFR 390.27). The request must be based upon evidence that the carrier has taken corrective actions and that its operations currently meet the safety fitness standards and factors specified in 49 CFR 385.5 and 385.7. The FMCSA will make a final determination based upon the documentation submitted and any other additional relevant information. A written decision will be issued by the FMCSA. Any motor carrier whose request for change is denied may, within 90-days after the denial, request administrative review under 49 CFR 385.15.

[B] 49 CFR 385.15: A request may be made to the FMCSA to conduct an administrative review if you believe that an error was committed in assigning the proposed safety rating or when your request under 49 CFR 385.17 was denied. This request must be made within 90 days of the date of the proposed safety rating issued under 49 CFR 385.11(c) or a final rating issued under 49 CFR 385.11(b), or within 90-days of the date of an Order denying your request for a rating change under 49 CFR 385.17.

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PART B

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Requirements and/or Recommendations

- 1 Ensure all drivers subject to pre-employment, random, reasonable cause, post accident, return to duty, and/or follow-up controlled substance testing are tested as required by Part 40/382 of the FMCSR.
- 2 An "Accident Countermeasures" manual is a tool that can be used by management to review with a driver how an accident might have been prevented. This manual is available from Triodyne, Inc., 5950 W. Touhy Ave., Niles, IL 60648-4610. Phone: (847) 677-4730.
- 3 Ensure all drivers' records of duty status (logs) are accurate. Check them against "supporting documents" to verify accuracy. Prohibit falsification of logs by any of your drivers. Review the rules on supporting documents. Take appropriate action against drivers who falsify logs.
- 4 If you want some of your drivers to use the 100 air-mile radius exemption, make sure that the drivers meet all terms of the exemption 100 air mile radius driver. A driver is exempt from the requirements of #395.8 if:
 - (e)(1) The driver operates within a 100 air mile radius of the normal work reporting location;
 - (e)(2) The driver, except a driver salesperson, returns to the work reporting location and is released from work within 12 consecutive hours;
 - (e)(3) At least 8 consecutive hours off duty separate each 12 hours on duty;
 - (e)(4) The driver does not exceed 10 hours maximum driving time following 8 consecutive hours off duty; and
 - (e)(5) The motor carrier that employs the driver maintains and retains for a period of 6 months accurate and true time records showing:
 - (e)(5)(i) The time the driver reports for duty each day;
 - (e)(5)(ii) The total number of hours the driver is on duty each day;
 - (e)(5)(iii) The time the driver is released from duty each day; and
 - (e)(5)(iv) The total time for the preceding 7 days in accordance with #395.8(j)(2) for drivers used for the first time or intermittently.Logs must be prepared if a driver does not meet the 12 hour requirement.

THE STATE OF CONNECTICUT HAS ADOPTED THE FMCSRs FOR VEHICLES THAT ARE SOLELY INTRA-STATE THAT HAVE A GROSS VEHICLE RATING OF 18,001 LBS AND GREATER.
- 5 Ensure that all vehicle file folders are marked properly with the vehicle make, year, identification number and tire size.
- 6 This review will result in a new Safety Rating of "Conditional".
- 7 A "Carrier Profile" is available (from a contractor hired by the US D.O.T.) which lists information on Driver/Vehicle

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PART B - RECOMMENDATIONS

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COMPLIANCE CENTRAL AUTO & TRANSPORT LLC

REVIEW

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Requirements and/or Recommendations

Inspections which have been performed on your drivers/vehicles, and which were uploaded into the mainframe D.O.T. computer in Washington. A copy is available for \$27.50 by writing to "OMC - Data Dissemination Program, P.O. Box 3248, Merrifield, VA 22116. Phone: (800) 832-5660.

8

Within 15 days, send a letter to our office describing what actions you have taken in response to this review to ensure you are complying with the Federal Motor Carrier Safety Regulations.

9

CRASH DATA REVIEW FOR PROPOSED CONDITIONAL RATING:

The State Director of Connecticut has the authority to review the preventability of accidents affecting Factor 6 on the Compliance Review (CR). You must submit the compelling evidence within 7 calendar days, if the Safety Rating is proposed to be Conditional to the following address:

Attn: Jeffrey Cimachosky, State Director
Federal Motor Carrier Safety Administration
628-2 Hebron Ave. Suite 303
Glastonbury, CT 06033

Compelling evidence must include (but is not limited to) official police accident reports and official insurance accident investigation reports. _____ Carrier Official Initials

10

"Discuss with your employees/drivers the "Security Measures for Truck Drivers and Companies" which were provided and reviewed with motor carrier official."

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CENTRAL AUTO & TRANSPORT LLC

USDOT: 0357848

State #:

Date: 09/19/2002

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Safety Fitness Rating Report

This report lists the facts which were used to determine the Safety Fitness Rating for the above motor carrier. A check mark identifies the range within which the data fell when determining the Safety Fitness Rating. All information within a FACTOR block relates only to that FACTOR.

FACTOR 1 General (CFR Parts 387, 390) ✓ 0 Point = Satisfactory
1 Point = Conditional
VIOLATIONS AFFECTING RATING POINTS >1 Point = Unsatisfactory
NONE TOTAL POINTS: 0 = SATISFACTORY

FACTOR 2 Driver Qualification (CFR Parts 382, 383, 391) ✓ 0 Point = Satisfactory
1 Point = Conditional
VIOLATIONS AFFECTING RATING POINTS >1 Point = Unsatisfactory
NONE TOTAL POINTS: 0 = SATISFACTORY

FACTOR 3 Operational/Driving (CFR Parts 392, 395) ✓ 0 Point = Satisfactory
1 Point = Conditional
VIOLATIONS AFFECTING RATING POINTS >1 Point = Unsatisfactory
NONE TOTAL POINTS: 0 = SATISFACTORY

FACTOR 4 Vehicle/Maintenance (CFR Parts 393, 396, Performance Data (OOS%))
VIOLATIONS AFFECTING RATING POINTS Out-of-Service (OOS) Percentage: 40.0
NONE TOTAL POINTS: 0 & 40.0% OOS = **CONDITIONAL** (see chart)

Fewer than 3 Inspections	3 or more Inspections	
	OOS Less than 34%	OOS 34% or Higher
	Satisfactory	✓ Conditional
	Conditional If a pattern of Non-Compliance with a Critical or an Acute Violation	Unsatisfactory If a pattern of Non-Compliance with a Critical or an Acute Violation
Rate same as other Regulatory Factors 1, 2, and 3		
0 Point = Satisfactory		
1 Point = Conditional		
>1 Point = Unsatisfactory		

FACTOR 5 Hazardous Material (CFR Parts 397, 171, 177, 180)

Not Applicable - Not a carrier of Hazardous Material

FACTOR 6 Crash (Recordable Crash Rate)

((Recordable Crashes) X (1 million)) ÷ (Total Miles) = Rate
(2 X 1,000,000) ÷ 1,016,639 = 1.987 = **UNSATISFACTORY**

CRASH RATE **FACTOR RATING**
0.000 - 1.500 = Satisfactory
✓ >1.500 = Unsatisfactory

RECEIVED BY :

TITLE :

CAPRI Version 4.4.2

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AFFIDAVIT

I, Robert Greco, being over the age of 18 years and understanding and believing in the obligation of an oath, hereby state the following:

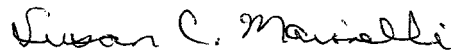
1. I am president of the corporation Central Auto & Transport.
2. I have been in the trucking and transport business for 15 years, and I am familiar with the industry customs and practices.
3. I am familiar with the police report for the March 9, 2002 motor vehicle accident which is attached hereto.
4. I personally viewed and inspected the truck which was involved in the March 9, 2002 motor vehicle accident.
5. There was no disabling damage done to the truck.
6. The truck was towed by Concetta's Towing in order for it to secure payment for its services in light of the fact that the accident had involved an out-of-state truck which was heading for the state of Florida and because fuel had been pumped from the truck. Other than the fact that the fuel had been pumped from the truck, the truck was capable of being driven.
7. It is industry practice for a towing company to tow a truck to secure its payment, especially in light of the fact that the truck was one from out of state and the chance of being paid

once the operator and the vehicle are out of state are small.

A handwritten signature in cursive script, appearing to read "Robert Greco", written over a horizontal line.

Robert Greco

Subscribed and sworn to before me this 25th day of September, 2002.

A handwritten signature in cursive script, appearing to read "Susan C. Marinelli", written over a horizontal line.

Susan C. Marinelli

Notary Public

My Commission Expires 3/31/06

[illegible]

STATE OF RHODE ISLAND UNIFORM ACCIDENT REPORT

0002438440

P. 03

1 3 Reporting Agency Johnston Police Department		Type of Collision (i.e. Car - Car) NONE		Report Number 02-215-2C		<input type="checkbox"/> Walk In	
Accident Date 03/09/2002		Day of the Week Saturday		Military Time 0744		Posted Speed 35	
City/Town JOHNSTON		Name of Street or Highway HARTFORD AVE		# of Lanes 4		Total Units Involved 3	
Distance (From Nearest Intersecting St.) <input type="checkbox"/> Feet <input type="checkbox"/> Miles		Direction (From Nearest Intersecting St.) N S E W		Nearest Intersecting Street/Landmark ROUTE 295			
Unit Number 0		Unit Type 100 - Witness		Operator's Last Name HORNER		First MARK	
Street/Mailing Address 155 DANIELSON PIKE		City/Town SCITUATE		State RI		Zip 02831	
Telephone 401-547-0551		DOB 11/03/1962		Sex M		License Number	
State RI		Class <input type="checkbox"/> CDL		Restrictions		Owner's Last Name	
First MARK		M.I.		Street/Mailing Address		City/Town	
State RI		Zip 02831		Telephone 401-547-0551		Insurance Co.	
Policy No.		Registration No.		State RI		VIN	
Vehicle Yr. 99		Make		Color		Plate Type	
# Air Bags Deployed		Air Bags <input type="checkbox"/> Front <input type="checkbox"/> Side		Direction of Travel N S E W		Towed By	
Damage Estimate <input type="checkbox"/> None <input type="checkbox"/> <\$500 <input type="checkbox"/> >\$500		Trailer Reg. No.		State RI		Make	
VIN		Towed By		Damage Description		Name all Persons Involved (Occupants - Witnesses - Pedestrians)	
Unit #		Sex		DOB		Seat	
Eject		Belt		Injury		Helmet	
Reporting Officer PATROLMAN STEPHEN BROWN		Badge No. 54		Date of Report 03/09/2002			

ACCIDENT REPORT NARRATIVE

Vehicle #1 was travelling east on Hartford Ave. in the right lane approaching the traffic signal at the intersection with Route 295 south offramp. The traffic signal was green when vehicle #1 was approaching the intersection. The operator noticed that two vehicles were stopped in the middle of the road in front of him. The operator applied the brakes and turned the vehicle to the right which subsequently caused it to jack-knife. The vehicle came to a rest with the right rear of the tractor pinned against the right side of the semi-trailer. No other vehicles were involved in the accident. The operator of vehicle #1 stated that he was travelling the speed limit and saw the traffic signal was green and was proceeding through the intersection. Due to the dense fog he said that he was unable to see the two vehicles stopped in his lane of travel in front of him until it was too late. He said he applied the brakes and swerved to the right to avoid a collision. He said this sudden movement along with the tires locking up caused the vehicle to jack-knife. He did not sustain any injury. Vehicle #1 had heavy damage to the right rear and light damage to the left front from striking the curb. The trailer in tow had moderate damage to the right side. It was empty at the time of this accident.

Witness #1 stated that he was traveling in the left lane when he saw vehicle #1, which was to the right of him, swerve to the right and start to jack-knife. He said that the driver did this because he noticed the two vehicles in front of him that had stopped in his lane of travel with one of the operators standing in the road. He said that the traffic signal was green and that the dense fog made it impossible to see them before it was too late. Witness #1 stated that after vehicle #1 jack-knifed, the operator of the first vehicle got into his vehicle and left the scene without offering any assistance or giving any of his information. He described the operator as a white obese male, 60's in a newer model 4D blue box style Cadillac (Possibly DeVille). In his opinion it was this person that caused the accident. He said the operator of vehicle #1 was not speeding.

Witness #2 was the operator of the vehicle directly behind the Cadillac. He said he was stopped at the red traffic signal behind the Cadillac. He said the signal turned green and the Cadillac did not move. After waiting a short period he blew his horn. The male operator of the Cadillac then exited his vehicle yelling at him for blowing his horn. Witness #2 stated that he could see the tractor trailer in his rear view mirror approaching him but he had nowhere to go because of this other individual in front of him. He said that after the accident the operator of the blue Cadillac jumped into his vehicle and left the scene. His description of the operator and vehicle were the same as witness #1. He said that the only reason this accident happened was because of the actions of the operator of the Cadillac who decided to block the road and confront him.

It should be noted that the dense fog made extremely poor visibility conditions and wet road surfaces. Vehicle #1 did not leave any skid marks. Based on witness statements it appears that the operator of the Cadillac caused the accident by using bad judgement and blocking the road to confront another operator on the road under extremely poor driving conditions. There was no registration plate obtained for the Cadillac. Vehicle #1 was towed by Coletta's Towing. Vehicle #1 did leak a small amount of diesel fuel which was cleaned up by Simm Environmental. Attached are two witness statements.

REPORTING OFFICER'S SIGNATURE

APPROVING OFFICER'S SIGNATURE

Operator Information Sheet

02-215-AC

P. 05

General

Accident Date 03/09/2002	Time 0744	Reporting Officer PATROLMAN STEPHEN W BROWN
Location HARTFORD AVE @ ROUTE 295		City JOHNSTON
		State RI
		ZIP 02919

Operator

OPERATOR	Last Name NESBITT		First SHAWN	Middle	Suffix	Veh/Unit 2	<input type="checkbox"/> Injured <input type="checkbox"/> Fatality
	Number 4	Street DUVAL	Suffix LN	Apt	City PLAINVILLE	State CT	ZIP 06062
	DOB 19790512		Home Phone 860-225-8598		Work Phone		License State/Number CT 057120990
	Insurance Company CANAL INS				Policy Number BA4920762		
	Last Name CENTRAL AUTO TRANSPORT LLC		First	Middle	Suffix	Home Phone	Work Phone
VEHICLE	Number P.O. BOX 340649	Street	Suffix	Apt	City HARTFORD	State CT	ZIP
	Year 1994	Make FREIGHTLINER	Model		VIN 2FUYSYB1RA578076		
	Registration State/Number CT 26372A		Towed By COLLETTA'S TOWING		Towed To COLLETTA'S TOWING		

OPERATOR	Last Name		First	Middle	Suffix	Veh/Unit	<input type="checkbox"/> Injured <input type="checkbox"/> Fatality
	Number	Street	Suffix	Apt	City	State	ZIP
	DOB		Home Phone		Work Phone		License State/Number
	Insurance Company				Policy Number		
	Last Name		First	Middle	Suffix	Home Phone	Work Phone
VEHICLE	Number	Street	Suffix	Apt	City	State	ZIP
	Year	Make	Model		VIN		
	Registration State/Number		Towed By		Towed To		

Report Number

02-215-AC

Conditions Supplemental to
the State of Rhode Island

UNIFORM ACCIDENT REPORT

Non-MV Conditions (All Pages)			
Box 1 3	Type of Roadway Divided w/ Barrier	Box 6 1	Light Condition Daylight
Box 2 3	Traffic Controls Traffic Signal	Box 7 2	Traffic Condition Medium
Box 3 2	Road Surface Asphalt	Box 8 2	Type of Location Rural
Box 4 2	Road Condition Wet	Box 9 99	(Initial) Collision JACK KNIFED TRACTOR TRAIL
Box 5 99	Weather Condition DENSE FOG		

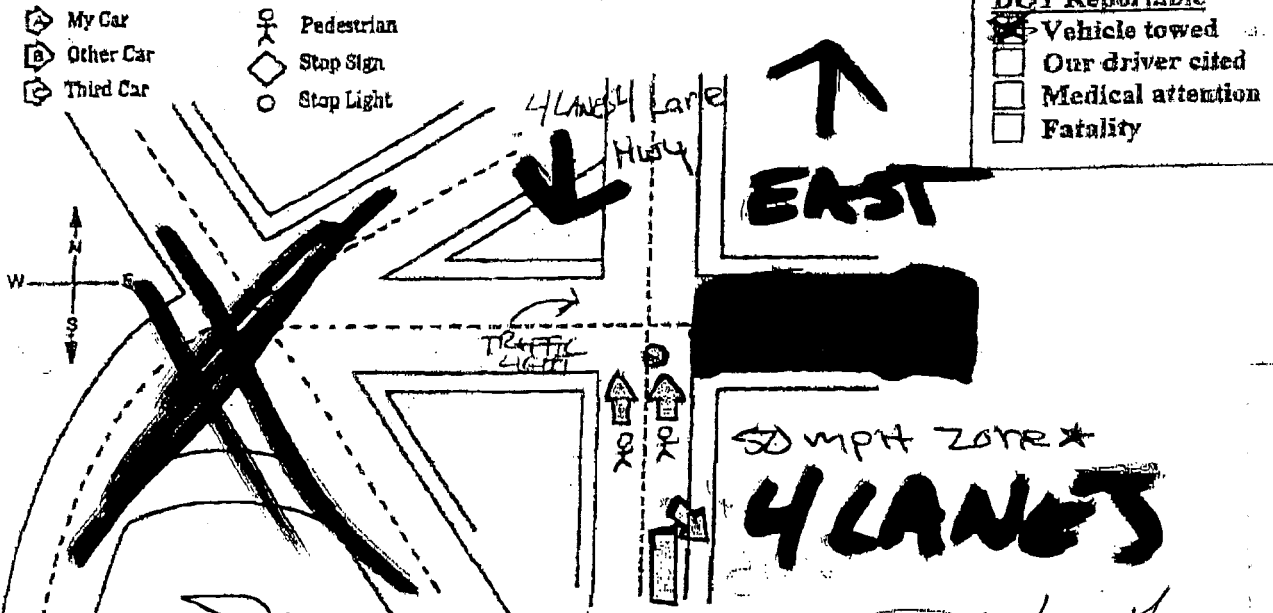
Unit Number 1 Conditions (Page 1)		Unit Number 10 Conditions (Page 1)	
Box 10a 99	Non M/V Collision JACK KNIFE TRACTOR	Box 10b 99	Non M/V Collision
Box 11a 1	Vehicle Action Prior to Accident Straight	Box 11b 1	Vehicle Action Prior to Accident
Box 12a 1	Physical Condition of Driver Appeared Normal	Box 12b 1	Physical Condition of Driver
Box 13a	Chemical Test Data	Box 13b	Chemical Test Data
Box 14a	Chemical Test Results	Box 14b	Chemical Test Results

Unit Number 06 Conditions (Page 1)	
Box 10	Non M/V Collision
Box 11	Vehicle Action Prior to Accident
Box 12	Physical Condition of Driver
Box 13	Chemical Test Data
Box 14	Chemical Test Results

Unit Number	Sex	Seat Location	Ejected	Seat Belt Use	Injury Code	Helmet
1 Unit 1	M Male	1 2 3	Y Yes	1 Shoulder (2 Pt)	1 Bumping/Broken Bones	Y Yes
2 Unit 2	F Female	4 5 6	N No	2 Lap (2 Pt)	2 Bruises/Abrasions	N No
3 Unit 3 (etc.)		7 8 9		3 Lap/Shoulder (3 Pt)	3 No Visible Injury/Complaints of Pain	
		10		4 Child Restrain	4 Fatal	
		11		5 Not Used	5 No Injury	
				6 Unknown		

CHARN NISSAN WAS TRAVELING EAST ON ROUTE 218 ON 9-17-02 at about 7:20 am. I was proceeding 5 to 7 mph slower than posted due to Dense Fog and wet roads. I was 15 miles away from destination with 30 min. to spare, so no rush was needed. From afar I could see a green traffic light with 40 sets of tail lights. As I came closer I ~~went~~ to the light I then saw two Pedestrian's thru the fog. I slowed down by down shifting one gear and applying little Brake. The truck then skid I knew I had better do something

The Accident Diagram: Show positions of all vehicles, traffic control, and persons.
Give name of streets.



3-11-02

Date

Shawn Furbie

Operator's Signature

Robert [Signature]

Supervisor's Signature

Fleet Safety Services, Inc.

18 John Street Place

Worcester, MA 01609

Phone: 508-791-1971

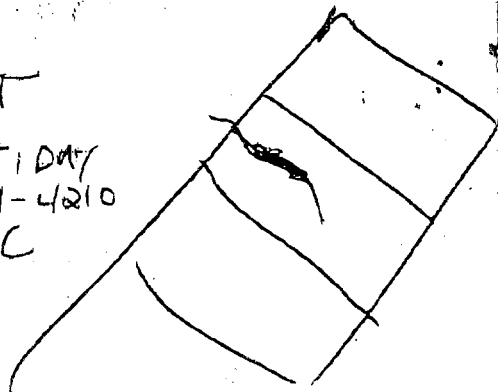
Fax: 508-831-7611

FLEET SAFETY

ATTN:
CHRIS HACKETT
UNIT 94
203-294-1237
3/11/02

POLICE REPORT

READY ON FRIDAY
401-231-4210
02-215-AC
PATROLMEN
BROWN



fast Deton Some got Hurt or worse... dead! I used my best
judgement By Pulling my vehicle out of harms way. That's r
Story.

↑
EAST
[REDACTED]
↑
HARMER
↑
HARMER

